

to 80 and the respiration increased in frequency. The whole picture changed. He was put back to bed after a regular subtemporal operation had been done and he did perfectly well all through that day until the next night when he again developed pressure symptoms, the pulse was down to 40 and 45. In the morning he had a somewhat extreme grade of bulbar anaemia. I decided to go in on the other side and do the decompressive operation. The brain was under still more tension here than on the day before and thinking that there might be an accumulation of blood I put in the trocar and tapped the ventricle, and I obtained a great deal of blood-stained fluid. As soon as the ventricle was emptied the condition became good, the pulse dropped and the respiration improved. The man made an uneventful recovery. However, he shot off his left optic nerve and so is perfectly blind in the left eye, the right eye had a postbulbar accumulation of blood but has cleared up and is now getting so that he can see pretty well. The bullet is still in the head some place. He shows one complication of subtemporal decompressive operation, he is having an asphasia for long words which I think is getting better.

Demonstration of a Specimen of Ball Thrombus of the Heart. By Dr. August Jerome Lartigau.

Demonstration of a Specimen of Ball Thrombus of the Heart, by Dr. August Jerome Lartigau:

This specimen was removed from a thirty-two-year-old hunch-backed woman, with a marked deformity of the pelvis and eight months pregnant. When first seen dyspnoea and cyanosis were pronounced. There was a marked distension of the veins of the neck, with a pulsation synchronous with the heart beat. Physical examination of the heart and lungs disclosed no abnormality. The dyspnoea and cyanosis were therefore attributed to pressure. Without any premonitory symptoms the patient died suddenly.

Autopsy—An irregularly globular, firm thrombus the size of a walnut, made up of concentric layers, was found in the dilated right auricle. It was freely movable, although attached by a few fresh bands of fibrin to the walls of the auricle.

DEPARTMENT OF TROPICAL MEDICINE.

The intimate trade relationships now existing between the Pacific Coast and tropical and semi-tropical countries, and the still more intimate relationships that will spring out of the opening of the Panama Canal render unnecessary any special arguments concerning the necessity of the study of tropical diseases in all medical schools, and particularly those of this western country. Not only is it important that men should have opportunities to become trained in tropical diseases in order that they may meet the health problems confronting the native and the white man who enters the tropics, but tropical diseases are fast becoming a serious menace to the white man in his own country. The Pacific Coast has not only frequent opportunity to see cases of acute and chronic tropical disease that have been imported into the United States, but several already exist endemically here, and unless properly handled by trained men, threaten danger, not only to the communities in which they now exist, but to the United States in general.

The faculty of the Oakland College of Medicine has long felt the need of establishing a department of tropical medicine, which would offer to its students an adequate training in this important subject. The opportunity to satisfy this need has just been rendered possible through the generous monetary bequests to the college of a number of its friends.

The faculty considers itself fortunate in having had Dr. Creighton Wellman accept its invitation to the chair of Tropical Medicine in the Oakland College of Medicine.

The courses of instruction that are to be offered by the department of tropical medicine will be announced at the beginning of the next school year.

DANGEROUS DRUGS IN HEADACHE MEDICINES.

Acetanilid, antipyrin, and phenacetin (acetphenetidin) are three comparatively new drugs which are widely used to produce insensibility to pain, and proprietary headache medicines are very apt to contain one or more of them. The use of such drugs without the advice of a physician is dangerous, since they tend to depress the heart and the nerves and may lead to the formation of a drug habit. This is proved by reports from 400 physicians, made in response to inquiries from the United States Department of Agriculture. These physicians state that from 1884 to 1907 they have known 28 deaths resulting from the use of one or another of these three drugs, besides 814 cases of poisoning, and 136 cases in which the patient had formed the drug-using habit, with various evil results. In 14 cases antipyrin was poisonous even when used externally. Even supposing the 525 physicians who failed to reply had no cases to report, what a terrible showing would be made if the 125,000 physicians in the United States could all give their testimony. Of the 400 physicians, acetanilid is rarely or never prescribed by 212, antipyrin by 307, and phenacetin by 180. In more than one-half the cases of poisoning the drug was taken by direction of a physician, a fact which leads one to reflect that if the physician is likely to have bad results in the use of these drugs the ordinary man should be doubly cautious in using them or anything containing them. Nowadays no one need take them unknowingly, for the National Food and Drugs Act requires that labels of proprietary medicines containing them shall show the fact.

The statements of these 400 physicians are confirmed by those of a committee of the British Medical Association which investigated the matter in 1894. The medical journals also, from time to time, have contained articles describing cases in which the use of these drugs has resulted badly. Altogether medical literature makes a showing of 13 deaths and 297 cases of poisoning from acetanilid; 488 cases of poisoning from antipyrin; and 70 cases of poisoning from phenacetin.

Physicians are using these drugs less freely and with greater caution than when they were first introduced. But the general public, on the other hand, in response to ingenious advertising, seems more and more to be purchasing headache mixtures containing these drugs and dosing themselves without advice from a physician. When considered in connection with the fact that cases of poisoning and death have been more frequent in recent years, this should lead the common man to be extremely cautious in the use of any remedy containing acetanilid, antipyrin, or phenacetin.

These facts are shown in detail in Bulletin 126 of the Bureau of Chemistry, U. S. Department of Agriculture, entitled, "The Harmful Effects of Acetanilid, Antipyrin, and Phenacetin," recently issued.

A JUST COMPLAINT.

California State Journal of Medicine:

Gentlemen—We have before us your issue of July, 1909, in which is reviewed Kassabian's "Roentgen Rays and Electro-Therapeutics," which we sent you on August 30, 1907.

With the review we have no quarrel, as the writer is of course entitled to his opinions and to express them, but in condemning a book that is not up-to-date, would it not be only even-handed justice to let it be known that the book was issued over two years ago, even if you did not show that it had